CLAIM AMENDMENTS

1-10. (cancelled)

11. (previously presented) An apparatus for use in medical procedures for treating subdural hematomas, the apparatus comprising a dual lumen catheter comprising, in combination:

a drainage channel having a proximal portion and a distal portion; and

an irrigation channel having a proximal portion and a distal portion wherein said irrigation channel being disposed inside said drainage channel, said irrigation channel comprising a plurality of tubes each having one end coupled in fluid communication to said distal portion of said irrigation channel, each opposite end of said plurality of tubes coupled to said drainage channel so that said plurality of tubes support said irrigation channel inside said drainage channel while at the same time said plurality of tubes being dimensioned to deliver an irrigant from said irrigation channel to a subdural space.

12-13. (cancelled)

14. (original) A method for treating subdural hematomas comprising, in combination, the steps of:

inserting a dual lumen catheter into a subdural space;

draining said subdural space of a subdural fluid collection with said dual lumen catheter; and

irrigating said subdural space using said dual lumen catheter.

15. (original) The method of Claim 14 further comprising the steps of:

providing a drainage channel having a proximal portion and a distal portion;

providing an irrigation channel having a proximal portion and a distal portion;

wherein said drainage channel and said irrigation channel comprise said dual lumen catheter;

draining said subdural space of a subdural fluid collection using said drainage channel of said dual lumen catheter; and

irrigating said subdural space using said irrigation channel of said dual lumen catheter.

16. (previously presented) A method for treating subdural hematomas comprising, in combination, the steps of:

inserting a dual lumen catheter into a subdural space;

draining said subdural space of a subdural fluid collection with said dual lumen catheter;

irrigating said subdural space using said dual lumen catheter;

providing a drainage channel having a proximal portion and a distal portion;

providing an irrigation channel having a proximal portion and a distal portion;

wherein said drainage channel and said irrigation channel comprise said dual lumen catheter;

draining said subdural space of subdural collection fluid through perforations defined by said drainage channel; and

irrigating said subdural space through perforations defined by said irrigation channel while draining of said subdural space by said drainage channel is performed.

17. (original) The method of Claim 16 wherein each of said drainage perforations having a diameter of between approximately .5 and 2 millimeters.

18. (original) The method of Claim 15 further comprising the steps of:

providing a pressure valve coupled to said proximal portion of said irrigation channel; and

operating said pressure valve in order to regulate a flow of fluid irrigation from said pressure valve to said irrigation channel.

19. (original) The method of Claim 18 further comprising the steps of:

providing an irrigation container dimensioned to retain an irrigation solution;

coupling said container to said pressure valve; and

operating said pressure valve in order to regulate a flow of fluid irrigation from said pressure valve to said irrigation channel.

20. (currently amended) The method of Claim 19 further comprising the step of coupling said container to said pressure valve with a ~~leur~~ luer lock fitting.

21. (original) The method of Claim 15 further comprising the steps of:

providing a drainage container dimensioned to receive subdural collection fluid from said drainage channel;

coupling said drainage container to a proximal end of said proximal portion of said drainage channel; and

draining said subdural space of said subdural collection fluid so that said drainage container fills with said subdural collection fluid from said subdural space.

22. (original) The method of Claim 14 further comprising the step of drilling a hole into a skull.

23. (previously presented) A method for treating subdural hematomas comprising, in combination, the steps of:

providing a tuohy needle;

drilling a hole in a skull;

inserting said tuohy needle into said subdural space of said skull;

inserting a dual lumen catheter into said tuohy needle;

draining said subdural space of a subdural fluid collection with said dual lumen catheter;

irrigating said subdural space using said dual lumen catheter; and

removing said tuohy needle from said subdural space.

24. (previously presented) A method for treating subdural hematomas comprising, in combination, the steps of:

providing a tuohy needle;

drilling a hole in a skull;

inserting said tuohy needle into a subdural space of said skull;

inserting a guide wire into said tuohy needle approximately parallel to the brain;

removing said tuohy needle from said subdural space;

advancing a dual lumen catheter along said guide wire into said subdural space;

draining said subdural space of a subdural fluid collection with said dual lumen catheter;

irrigating said subdural space using said dual lumen catheter; and

removing said guide wire from said subdural space.

25. (previously presented) A method for treating subdural hematomas comprising, in combination, the steps of:

drilling a hole in a skull;

inserting a stylette into a dual lumen catheter in order to give said dual lumen catheter rigidity;

inserting said dual lumen catheter into a subdural space;

draining said subdural space of a subdural fluid collection with said dual lumen catheter;

irrigating said subdural space using said dual lumen catheter; and

removing said stylette from said dual lumen catheter.

26. (original) The method of Claim 14 wherein said draining of said subdural space occurring over approximately three days.

27. (original) The method of Claim 14 wherein said irrigating of said subdural space occurring over approximately between 1-2 days.

28-33. (cancelled)